COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION B. Date of Delivery A. Received by (Please Print Clearly) Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signature so that we can return the card to you. (a) Agent Attach this card to the back of the mailpiece, ☐ Addressee or on the front if space permits. Yes D. Is delivery address different from item 1? If YES, enter delivery address below: Article Addressed to: * 01-348 Barry D. Wood Wood, Maines & Brown 1827 Jefferson Place, N.W. 3. Service Type Washington, DC 20036 ☐ Express Mail ☐ Certified Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 29 0023 102595-00-M-0952 Domestic Return Receipt PS Form 3811, July 1999 DOCKET NO. 01-348 ORDER DATED CERTIFIED MIMEOGRAPH NO. MAHRECEIVED & INSPECTED RECEIPT RETURN NAME: Barry D. Wood C. R. R. NO. Wood, Maines & Brown FCC - MAILROOM 1827 Jefferson Place, N.W. Washington, DC 20036 **U.S. Postal Service**

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Fostage \$ 60 348

Certified Fee 2.3.0 Postmark
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.65

Name (Please Frint Clearly) (to be completed by male Sireel, Apr. No. 20 PO. Eco. Vo. Citi. State. ZIF-1.

See Reverse for Instructions